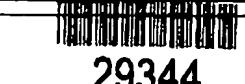
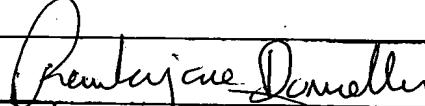


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## DECLARATION — Utility or Design Patent Application

Direct all correspondence to:		<input checked="" type="checkbox"/> The address associated with Customer Number:	 29344 PATENT & TRADEMARK OFFICE	<input type="checkbox"/> OR <input type="checkbox"/> Correspondence address below
Name				
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<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</p>				
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) <i>Rory Joseph</i>		Family Name or Surname <i>Donnelly</i>		
Inventor's Signature 		Date <i>16 November 04</i>		
Residence: City Surrey	State GBX	Country Great Britain	Citizenship Great Britain	
Mailing Address Dunrobin, Manor Park, The Avenue, Whyteleafe				
City Surrey	State Great Britain	Zip CR3 0AQ	Country Great Britain	
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) <i>Paula Jane</i>		Family Name or Surname <i>Donnelly</i>		
Inventor's Signature 		Date <i>16 November 04</i>		
Residence: City Surrey	State GBX	Country Great Britain	Citizenship Great Britain	
Mailing Address Dunrobin, Manor Park, The Avenue, Whyteleafe				
City Surrey	State Great Britain	Zip CR3 0AQ	Country Great Britain	
<input type="checkbox"/> Additional inventors or a legal representative are being named on the <i>supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.</i>				

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**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

Declaration Submitted With Initial Filing      OR       Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)))

Attorney Docket Number	GRW-0001
First Named Inventor	Donnelly, Rory Joseph COMPLETE IF KNOWN
Application Number	
Filing Date	
Art Unit	
Examiner Name	

I hereby declare that:

**Each Inventor's residence, mailing address, and citizenship are as stated below next to their name.**

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

## **SELECTIVE OUTGOING CALL BARRING**

*(Title of the Invention)*

the specification of which

Is attached hereto

OR

was filed on (MM/DD/YYYY)

05/29/2003

as United States Application Number or PCT International

**Application Number**

PCT/GB03/02351 and was amended on (MM/DD/YYYY)

(if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT International filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Select that of the application on which priority is claimed:					
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES	Certified Copy Attached? NO
PCT/GB03/02351	PCT	05/29/2003	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
0212833.8	GB	06/01/2002	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
0221934.3	GB	09/20/2002	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
0300289.6	GB	01/07/2003	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.**

[Page 1 of 21]

[Page 1 of 2]

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**POWER OF ATTORNEY  
and  
CORRESPONDENCE ADDRESS  
INDICATION FORM**

Application Number	
Filing Date	
First Named Inventor	Donnelly, Rory Joseph
Title	Selective Outgoing Call Barring
Art Unit	
Examiner Name	
Attorney Docket Number	GRW-0001

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

 Practitioner(s) associated with the Customer Number.

OR

 Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

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I am the:

 Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(d) is enclosed. (Form PTO/SB/06)

SIGNATURE of Applicant or Assignee of Record

Signature	Rory Joseph Donnelly	Date	25 NOV 04
Name	Rory Joseph Donnelly	Telephone	
Title and Company			

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required. See below.

Total of \_\_\_\_\_ forms are submitted.

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a patent by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450; Alexandria, VA 22313-1450.

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**POWER OF ATTORNEY  
and  
CORRESPONDENCE ADDRESS  
INDICATION FORM**

Application Number	
Filing Date	
First Named Inventor	Donnelly, Rory Joseph
Title	Selective Outgoing Call Barring
Art Unit	
Examiner Name	
Attorney Docket Number	GRI-0001

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

 Practitioner associated with the Customer Number:29344  
PATENT PRACTITIONER NUMBER

OR

 Practitioner(s) named below:

Name	Registration Number

as my/her attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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State

Zip

Country

Telephone

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I am the:

 Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(d) is enclosed. (Form PTO/SB/84)

SIGNATURE of Applicant or Assignee of Record

Signature

Date

25 NOV 04

Name

Telephone

Title and Company

Paula Jane Donnelly

NOTE: Signatures of all the inventors or employees of record of the entire interest or their representative(s) are required. Supply multiple forms if more than one signature is required, see below.

 Total of \_\_\_\_\_ forms are submitted.

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